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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/919,780
	Filing Date	July 31, 2001
	First Named Inventor	Kley, Victor B.
	Art Unit	2881
	Examiner Name	Christopher M. Kalivoda
Total Number of Pages in This Submission	Attorney Docket Number	020921-001611US

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form (Issue Fee) <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input checked="" type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> 1. Return Postcard
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual	Townsend and Townsend and Crew LLP David N. Stone Reg. No. 28,572
Signature	<i>David Stone</i>
Date	June 25, 2003

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	M. Diane Dubé		
Signature	<i>M. Diane Dubé</i>	Date	June 23, 2003

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20350 7590 03/25/2003

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M. DIANE DABE (Depositor's name)
M. Diane Dabe (Signature)
6-25-03 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/919,780	07/31/2001	Victor B. Kley	020921-001611US	4836

TITLE OF INVENTION: SCANNING PROBE MICROSCOPY INSPECTION AND MODIFICATION SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$650	\$300	\$950	06/25/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
KALIVODA, CHRISTOPHER M	2881	250-306000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

General Nanotechnology LLC

Berkeley, CA

Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☒ corporation or other private group entity ☐ government

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☒ Publication Fee

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David Slove **6/25/03**

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02 FC:1504	300.00 BA
03 FC:8001	30.00 BA

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